## DEGLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter, which is claimed and for which a patent is sought on the invention entitled: **Treatment of tumours** 

the specification of which

[] is attached hereto.

Was filed on <u>September 9,7003</u> as United States Application Number or PCT International Application Number <u>(0)658,1255</u> and was amended on \_\_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed:

ountry	Application Number	Date of Filing (day/month/year)	Priority Claimed
weden	0100857-2	13.03.2001	YES [X] NO []
			YES[] NO[]

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Application Number:

Filing Date:

Application Number: Filing Date:

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application Serial Number:

Parent Filing Date:

Parent Patent No:

U.S. Parent Application Serial Number:

Parent Filing Date:

Parent Patent No:

PCT Parent Number: PCT/SE02/00443

Parent Filing Date: 11.03.2002

POWER OF ATTORNEY: I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

SAMUELS, GAUTHIER & STEVENS LLP

225 Franklin Street

Suite 3300

Boston, MA 02110

**USA** 

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole first inventor (given name, family name): Tom	las Hagström
Inventor's signature Valleas Trappalla	Date: 9/9 - 03
Residence: Svartmåla Gård	Citizenship: Swedish
Post Office address: S-590 41 RIMFORSA, Sweden	
Full name of second joint inventor (given name, family name): P	eter Söderkvist
Inventor's signature:	Date: 9/9 - 03
Residence: Lindnegatan 39	Citizenship: Swedish
Post Office address: S-582 53 LINKÖPING, Sweden	
Full name of third joint inventor (given, name, family name): Jan	n-Erling Bäckvall
Inventor's signature: Jan Backvall	Date: $9/9 - 03$
Residence: Egils-väg fen 2	Citizenship: Swedish
Post Office address: S-182 78 STOCKSUND, Sweden	
Full name of fourth joint inventor (given, name, family name):	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office address:	
Additional inventor's are being named on separately	y numbered sheets attached hereto.



## VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS

10/658,125

Group No.:

1614

Filed:

9/9/03

Examiner:

Unknown

For:

TREATMENT OF TUMOURS

Applicant:

Tomas Hagstrom

I hereby declare that I am an official of the following small business concern and am empowered to act on its behalf:

Tomas Hagström Svartmåka Gård S-590 41 Rimforsa SWEDEN

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time, or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third-party or parties controls or has the power to control both.

I hereby declare that rights under contract or law to the application filed September 20, 1999 as U.S. Pat. Appln. Ser. No. 09/399,405 have been conveyed to, and remain with, the above-identified small business concern.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern, or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

I acknowledge the duty to file, in this application, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small business entity in no longer appropriate.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC §1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: TOMAS HAGS EVON

TITLE OF PERSON SIGNING: Senior physician

ADDRESS OF PERSON SIGNING: Svartmala Gard

59041 Rumforsa

Sweden

Signature: Lateral Pellipate: 28 - 01 - 2004